

Division of Energy, Mineral, and Land Resources Land Quality Section

National Pollutant Discharge Elimination System

FOR AGENCY USE ONLY						
Date Received						
Year	Month		Day		,	
Certi	ficate	of	Cov	eraș	ge	
N C G						
Check #		Amount				
Permit Assigned to						

NCG170000

NOTICE OF INTENT

National Pollutant Discharge Elimination System application for coverage under General Permit NCG170000:

STORMWATER DISCHARGES associated with activities classified as:

SIC* 22 Textile Mill Products

And, Like activities deemed by DEMLR to be similar in the process, or the exposure of raw materials, products, by-products, or waste materials.

* Standard Industrial Classification Code

(Please print or type)

)	Mailing address of own	er/operator (address to which official	permit co	rrespondence will be mailed	
		State			
)	Location of facility producing discharge:				
	O	State			
		Fax:			
)	Physical Location Infor		use street	t names, state road numbers,	
	Physical Location Information Please provide a narrative and distance and direction (A copy of a county map or USGS	mation: e description of how to get to the facility of from a roadway intersection). quad sheet with facility clearly located on the map is recognized.	use street	t names, state road numbers,	
	Physical Location Infor Please provide a narrativ and distance and directio (A copy of a county map or USGS Latitude	mation: e description of how to get to the facility on from a roadway intersection). quad sheet with facility clearly located on the map is recommended.	use street	t names, state road numbers,	
	Physical Location Infor Please provide a narrativ and distance and directio (A copy of a county map or USGS Latitude This NPDES Permit App	mation: e description of how to get to the facility of from a roadway intersection). quad sheet with facility clearly located on the map is reconstituted. Longitude	use street uired to be su legrees, r ing:	t names, state road numbers, ubmitted with this application) minutes, seconds)	
	Physical Location Infor Please provide a narrativ and distance and directio (A copy of a county map or USGS Latitude	mation: e description of how to get to the facility of from a roadway intersection). quad sheet with facility clearly located on the map is reconstituted. Longitude	use street uired to be su legrees, r ing:	t names, state road numbers, sbmitted with this application) minutes, seconds)	
	Physical Location Infor Please provide a narrative and distance and direction (A copy of a county map or USGS Latitude This NPDES Permit App New or Proposed Face	mation: e description of how to get to the facility of from a roadway intersection). quad sheet with facility clearly located on the map is reconciled to the map is reconciled to the map is reconciled to the following state of the facility of the fa	use street uired to be su legrees, r ing:	t names, state road numbers, ubmitted with this application) minutes, seconds)	
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	Physical Location Infor Please provide a narrative and distance and direction (A copy of a county map or USGS Latitude This NPDES Permit App New or Proposed Factors Existing Standard Industrial Cla Provide the 4 digit Standard	mation: e description of how to get to the facility of from a roadway intersection). quad sheet with facility clearly located on the map is reconstructed. Longitude	use street uired to be su legrees, r ing:	t names, state road numbers, shmitted with this application) minutes, seconds)	

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8)	Dis	charge points / Receiving waters:				
	Ho	many discharge points (ditches, pipes, channels, etc.) convey stormwater from the property?				
9)	Wh	eiving waters: at is the name of the body or bodies of water (creek, stream, river, lake, etc.) that the facility stormwatharges end up in?	iter			
		e site stormwater discharges to a separate storm sewer system, name the operator of the separate st er system (e.g. City of Raleigh municipal storm sewer).	orm			
10)	Do	Does this facility have any other water quality permits?				
	□ □ If v					
11)	_	s this facility have any Non-Discharge permits (ex: recycle permits)?				
•••,		lo				
12)	Do	s this facility employ any best management practices for stormwater control?				
	☐ ☐ If y					
13)	Do	s this facility have a Stormwater Pollution Prevention Plan?				
		lo				
	-	s, when was it implemented?				
14)	Are	vehicle maintenance activities occurring at this facility?				
		lo □ Yes				
15)	На	ardous Waste:				
	a)	Is this facility a Hazardous Waste Treatment, Storage, or Disposal Facility?				
		□ No □ Yes				
	b)	ls this facility a Small Quantity Generator (less than 1000 kg. of hazardous waste generated per mon of hazardous waste?	th)			
		□ No □ Yes				
	c)	ls this facility a Large Quantity Generator (1000 kg. or more of hazardous waste generated per month hazardous waste?	າ) of			
		□ No □ Yes				

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	Type(s) of waste:	
	How is material stored:	
	Where is material stored:	
	How many disposal shipments per year:	
	Name of transport / disposal vendor:	
	Vendor address:	
16) (Certification:	
ı	North Carolina General Statute 143-215.6 b (i) pro	ovides that:
	Any person who knowingly makes any false statement, represent or other document filed or required to be maintained under Ar Commission implementing that Article, or who falsifies, tamper monitoring device or method required to be operated or mainta Management Commission implementing that Article, shall be gu \$10,000, or by imprisonment not to exceed six months, or by both of not more than \$10,000 or imprisonment not more than 5 years,	ticle 21 or regulations of the Environmental Management is with or knowingly renders inaccurate any recording or ined under Article 21 or regulations of the Environmental illty of a misdemeanor punishable by a fine not to exceed in (18 U.S.C. Section 1001 provides a punishment by a fine
ŗ	I hereby request coverage under the referenced Ger permit will constitute the permit requirements for the an individual permit.	neral Permit. I understand that coverage under this discharge(s) and is enforceable in the same manner as
·	knowledge and belief such information is true, comp Printed Name of Person Signing: Title:	
	(Signature of Applicant) S Notice of Intent must be accompanied by a che DENR.	(Date Signed) ck or money order for \$100.00 made payable to
NCD <u>Fina</u> This		ss all of the following items have been included. ion in anticipation of a check under separate cover.
NCD <u>Fina</u> This	application will be returned as incomplete unle	perator, and all supporting documents
Fina This Plea	c application will be returned as incomplete unlessed on the ask us to hold an incomplete applicate to the second of the second	perator, and all supporting documents

Please note: The submission of this document does not guarantee the issuance of an NPDES permit.

For questions, please contact the DEMLR Central Office or Regional Office for your area.

To visit our website, go to http://portal.ncdenr.org/web/lr/stormwater

DEMLR Regional Office Contact Information:

Asheville Office (828) 296-4500
Fayetteville Office (910) 433-3300
Mooresville Office (704) 663-1699
Raleigh Office (919) 791-4200
Washington Office (252) 946-6481
Wilmington Office ... (910) 796-7215
Winston-Salem (336) 771-5000
Central Office (919) 707-9220

